PTO/SB/08b (12-08)

Approved for use through 01/31/2009. OMB 0651-0031

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Complete if Known Substitute for form 1449/PTO Application Number 10/542,715-Conf. #5738 INFORMATION DISCLOSURE July 20, 2005 Filing Date STATEMENT BY APPLICANT First Named Inventor Wolfgang Gaschler Art Unit 1713 (Use as many sheets as necessary) R. D. Harlan Examiner Name 12810-00109-US Sheet 1 1 Attorney Docket Number of

			U.S.	PATENT DO	CUMENTS		
Examiner Initials*	Cite No. ¹	Docurnent Number Number-Kind Code ² (if known) Number-Kind Code ³ (if known)		Date Name of Patentee or		Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
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Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²				

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